

Grievance Process Guide for Recipients of Mental Health Services

Non-Discrimination Notice

The Department of Health and Human Services (DHHS) does not discriminate on the basis of disability, race, color, creed, gender, age or national origin in admission to, access to, or operations of its programs, services or activities, or its hiring or employment practices.

This notice is provided as required by Title II of the Americans with Disabilities Act of 1990 and in accordance with the Civil Rights Act of 1964 as amended, Section 504 of the Rehabilitation Act of 1973, as amended, the Age Discrimination Act of 1975 and the Maine Human Rights Act.

Questions, concerns, complaints or requests for additional information regarding the ADA may be forwarded to the DHHS ADA/EEO Compliance Coordinator, #11 SHS, Augusta, ME 04333-0040; (207) 287-4289 (voice); (207) 287-2000 (TTY).

Individuals who need auxiliary aids or services for effective communication in programs and services of DHHS are invited to make their needs and preferences known to the ADA/EEO Compliance Coordinator.

Introduction

As a recipient of mental health services, you have certain rights in addition to any other rights you may have as a citizen. If you are receiving inpatient or outpatient services, you always have the right to:

- be treated with courtesy and respect
- a treatment environment that upholds these values

No right, benefit, privilege or authority may be denied to you simply because you are a recipient of mental health services.

Problem-Solving Options

If a problem related to your mental health service arises, you can seek to solve it in several different ways.

Informal agency processes: Some agencies, for example, may have an informal dispute resolution process of their own. You are welcome to use that process if you wish. It is important to realize, however, that you have the right to use the formal grievance process if you become dissatisfied with a service provider's informal dispute resolution process.

Mediation services: You may also try working out a problem or issue you have by seeking mediation services. A mediator can be appointed to help work out an agreement between everyone concerned. You also have the right to use the formal grievance process if you become dissatisfied with the results of mediation.

The formal grievance process: This Guide is designed to describe the grievance processes currently used by the Department of Health and Human Services for people receiving mental health services. There is one grievance process for adult recipients and a distinctly different process for child and adolescent recipients. Therefore, this Guide is divided into two sections - one for adults and one for children and adolescents. As you learn about these processes, it is important to remember that you have the right to use any of the available grievance processes without experiencing negative consequences of any kind, such as being denied services.

For more information about ways to pursue the options mentioned on this page, contact the DHHS Office of Advocacy or Disability Rights Center of Maine. Their addresses and phone numbers may be found in the "Important Addresses and Phone Numbers".

The Basics

What can be grieved?

Any possible violation of basic rights, including any right defined in the current edition of the BDS' Rights of Recipients of Mental Health Services or the BH' Rights of Recipients of Mental Health Services Who Are Children in Need of Treatment, or the Settlement Agreement in *Bates v. Duby* (the AMHI Consent Decree), or any other applicable law or regulation. All of these documents are available through the DHHS Office of Advocacy at the address listed on page 14 of this Guide.

Grievances may also be filed when you feel you have been subjected to any questionable or inappropriate treatment or method of providing treatment. You may also choose to file a grievance if you are dissatisfied with:

- any policy or procedure that is used in relation to your care
- any action taken by a mental health facility or agency
- inaction on the part of a facility or agency

Who can bring a grievance?

Any recipient of mental health services whose services are delivered by any facility providing inpatient psychiatric services and by all agencies or facilities providing inpatient, residential, or outpatient mental health services (including community support and case management services) that are licensed, funded, or contracted by the Department of Health and Human Services (DHHS).

A grievance may also be brought by a recipient's parent, guardian or custodian, a recipient's attorney, a designated representative (anyone whom the recipient "designates" in writing to represent his or her interests), a representative of the DHHS Office of

Advocacy, or a representative of the Disability Rights Center. For more information, consult the Rights of Recipients of Mental Health Services or the Rights of Recipients of Mental Health Services Who Are Children in Need of Treatment, DHHS Office of Advocacy staff, or Disability Rights Center of Maine staff.

Who can guide and/or represent me throughout the grievance process?

DHHS Office of Advocacy staff, who are located inside Augusta Mental Health Institute and Bangor Mental Health Institute, as well as in the community, are available to assist you throughout the process. Disability Rights Center of Maine staff are also very experienced in representing recipients' interests throughout the grievance process.

These individuals are expected to work for you. They can help you put your grievance in writing, file your grievance, appeal decisions made about your grievance, and represent you at any meeting that takes place.

Is information related to my grievance confidential?

The information contained in your records, including information about your grievance, is considered confidential. However, there are circumstances under which such information can be released.

You can, for example, consent (in writing) to have the information contained in your records released to certain individuals while your grievance is being investigated. For more information about confidentiality regulations, consult the Rights of Recipients of Mental Health Services or the Rights of Recipients of Mental Health Services Who Are Children in Need of Treatment or contact the BDS Office of Advocacy or the Disability Rights Center of Maine.

In addition, if you exercise your right to appeal to the Maine Superior Court under Rule 80C of the Maine Rules of Civil Procedures, the records and the hearing transcript become public records.

Section I

Level I - Grievances Related to Services Provided in the Community

You should ask whether a grievance form is available from the facility or agency that is providing services to you. If a form is available, use the form.

If there isn't a form available, you may use the sample form of this Guide, or write "Level I Grievance" at the top of a piece of paper and write about the problem or issue you wish to grieve. Some of the information you may want to include is:

- the date on which you are submitting the grievance
- the location, time, and date of the event you have filed a grievance about
- the names of the people involved
- a short description of what happened
- the specific issue that needs to be addressed
- your suggestions about possible ways to resolve the situation

- where and how you can be reached

Submit the grievance to the head of the agency, unless you are directed by an individual employed by the agency to submit it to someone else. It is also a good idea to keep a copy for yourself.

If you feel the situation you are seeking to resolve needs urgent attention, see the discussion on "urgent grievances".

LEVEL I GRIEVANCES RELATED TO SERVICES PROVIDED AT AMHI, BMHI, OR OTHER INPATIENT FACILITIES

Ask any staff on your ward for a grievance form. Fill it out, hand it in to the ward office or nursing station. Also ask a staff person to make a copy of your grievance, and deliver it to you. If no grievance form is available, you may either use the sample form included on page 16 of this Guide, or write "Level I Grievance" at the top of a piece of paper, and write about the problem or issue you wish to grieve. Some of the information you may want to include is:

- the date on which you are submitting the grievance
- the location, time, and date of the event you are submitting a grievance about
- the names of the people involved
- a short description of what happened
- the specific issue that needs to be addressed
- your suggestions about possible ways to resolve the situation
- where and how you can be reached

The manager of the ward in which you are residing is responsible for responding to your grievance. Copies of your grievance will be forwarded to the DHHS Office of Advocacy.

If you feel the situation you are seeking to resolve needs urgent attention, see the discussion on urgent grievances.

LEVEL I GRIEVANCES RELATED TO SERVICES PROVIDED BY DHHS REGIONAL OFFICE STAFF

You can use the sample form provided, or write "Level I Grievance" at the top of a piece of paper and describe the problem or issue you wish to grieve. Some of the information you may want to include is:

- the date on which you are submitting the grievance
- the location, time, and date of the event you are submitting a grievance about
- the names of the people involved
- a short description of what happened
- the specific issue that needs to be addressed
- your suggestions about possible ways to resolve the situation
- where and how you can be reached

Submit your grievance to the DHHS regional director for your area. Information on how to contact the regional director for your area may be found on pages 14 and 15.

If you feel the situation you are seeking to resolve needs urgent attention, see the discussion on "urgent grievances".

WHAT HAPPENS NEXT

A formal written response to your grievance **MUST** be made to you in writing within five (5) working days (NOTE: weekends and holidays are not considered working days). However, the person responding to your grievance does have the right to request five (5) additional working days to complete his or her response. When such an extension of time is requested, it is automatically granted. You must be notified of that extension in writing.

The person responding to your grievance will investigate the situation you've filed a grievance about. In the course of the investigation, he or she may talk with you and anyone else who was involved in, or witnessed, the event(s) your grievance describes. He or she may examine your treatment record, if that record is relevant to the grievance you've filed.

Once that investigation is completed, the response you receive will describe the results of that investigation and will include his or her recommendations for resolving the situation.

If your service provider does not respond to your grievance within the five-day period, or does not request an additional five working days to respond, you may automatically submit your grievance to Level II.

URGENT GRIEVANCES

If you feel that your grievance is urgent, write "Urgent Grievance" at the top of the page on which you describe your grievance. If you do so, the provider must forward your grievance to the next grievance level (Level II) within one (1) working day. (For more information on Level II grievances.) Some grievances are automatically defined as urgent according to state regulations.

Grievances that are automatically defined as urgent: Any grievance that is related to the development, terms, or implementation of an individual support plan (ISP) or a hospital treatment and discharge plan is automatically considered an urgent grievance.

Grievances that must be reviewed to determine whether or not they are urgent: Some grievances may require further review to determine whether they are urgent or not. If the grievance is related to services being provided in the community, the program manager for adult mental health services will review it. Grievances involving services being received at a facility will be reviewed by the head of

that facility. Grievances involving services being provided by BDS staff will be reviewed by the DHHS regional director.

URGENT GRIEVANCES--WHAT HAPPENS NEXT

If the individual reviewing the grievance at Level II decides that the matter is indeed urgent, a formal written response to that grievance must be made to you within three (3) working days.

If, however, the grievance is reviewed and not found to be urgent, the grievance is referred back to Level I.

APPEALING LEVEL I DECISIONS

If you are dissatisfied with the response you receive at Level I, you may appeal that decision to the second level of the grievance process. No particular form is required to appeal a decision to Level II. You may simply write "I appeal my grievance to Level II" on a sheet of paper. Also include the date, the name of the service provider/agency involved, and a brief description of the reason why you are appealing the decision that's been made.

It is the responsibility of people receiving Level I grievances to maintain copies of all of the documents related to your grievance so that they can be forwarded to the people who will be considering your appeal.

If you are appealing a decision made about services provided to you in the community, or by DHHS regional office staff, the BDS program manager for those services will review your grievance at Level II. (See page 9 for details.)

If you are appealing a decision made about services provided in AMHI or BMHI, the superintendent's office will review your grievance at Level II. (See page 9 for details.)

If you are appealing a decision made about services provided in another inpatient facility, the office of the chief administrator of that facility is responsible for obtaining all of the other information about your grievance from the ward office or nursing station. (See the page 9 for details.)

Your appeal must be filed within ten (10) working days of the date you received your Level I response.

Level II Grievances Related to Services Provided in the Community

If you are receiving adult mental health services provided, licensed or funded by DHHS, you must send your appeal to the mental health program manager at the address listed.

The DHHS program manager will obtain all of the other information about your grievance from the agency or regional office involved. Copies of your grievance will be forwarded to the BDS Office of Advocacy.

LEVEL II GRIEVANCES RELATED TO SERVICES PROVIDED BY INPATIENT FACILITIES

If you are a patient at AMHI or BMHI, submit your appeal notice to the superintendent's office at the address listed. That office is responsible for obtaining all of the other information about your grievance from the ward office or nursing station.

If you are being treated at another inpatient facility, send your appeal notice to the chief administrative officer of that facility. It is the responsibility of that officer's staff to obtain all of the other information pertaining to your grievance. Copies of your grievance will be forwarded to the BDS Office of Advocacy.

WHAT HAPPENS NEXT

A written response is due to you within five (5) working days of the date that the program manager/facility head receives your appeal. If that individual does not respond to your grievance within the five-day period, or does not request an additional five (5) working days to respond, you may automatically submit your grievance to Level III.

During this time, the DHHS program manager or facility head will review the information he or she receives from Level I. He or she may also decide to further investigate the facts of the situation your grievance describes. This may include reviewing your treatment record, talking with you and with the other people who were involved in, or who witnessed the event(s) you've described, and holding a meeting/hearing to discuss your grievance. You are permitted, but not required, to present evidence and call witnesses on your behalf during that meeting. An electronic or written record must be made of any proceedings that take place during this phase of the appeals process.

Under rare circumstances, a DHHS program manager may send a Level II grievance to the Maine Department of Labor's Division of Administrative Hearings. (For a discussion of this procedure, which usually occurs at Level III of the grievance process.)

APPEALING LEVEL II DECISIONS

If you are dissatisfied with the Level II response to your grievance, you may appeal to the Commissioner of DHHS.

Your appeal must be in writing, but no particular form is required. You may write "I appeal my grievance to Level III." On that same sheet of paper, include the date and a brief description of the reason why you are appealing the decision that's been made.

The commissioner's office will obtain all of the other information related to your appeal.

Your appeal must be sent within ten (10) working days of the day you receive the Level II decision.

Level III Grievances Related to Services Provided in the Community and at Inpatient Facilities

When the commissioner receives your appeal, it will be sent to the Department of Labor (DOL) Division of Administrative Hearings, 54 State House Station, Augusta, ME 04333 within five (5) working days. The Division of Administrative Hearings, a special unit within the Department of Labor, is staffed by people who are trained and experienced in making impartial decisions about matters under dispute.

The commissioner also will send a letter to the Division of Administrative Hearings that will indicate whether the grievance is being referred for a "final" decision or a "recommended" decision. A copy of that letter will also be sent to you.

WHAT HAPPENS NEXT

Within five (5) days of receiving the commissioner's letter, the Department of Labor Division of Administrative Hearings will begin preparing for a hearing on your grievance.

Pre-hearing Conference:

A pre-hearing conference is not required by law, but the hearing officer will probably hold a meeting to talk to you and someone who represents the agency or facility you have filed a grievance against. During this meeting, you will be asked to identify the issues that need to be discussed during the hearing. You may also be asked to talk about what, if any, witnesses and documents you may want to bring to the hearing, so that it will proceed as smoothly as possible.

It is important to remember that you can avoid a hearing and settle your grievance at any point in the process--until the hearing officer has issued his or her decision. You can even settle your grievance after the hearing has begun. For more information about other ways to settle your grievance, see "Problem-Solving Options".

The Administrative Hearing:

You will receive written notice of the date, time, and place of the hearing from the hearing officer, Department of Labor employee. At the hearing, you may present any witnesses to the event(s) under discussion, or present any documents that are relevant to the situation under review.

You also may examine and/or cross-examine witnesses, and have an attorney, a designated representative, or Disability Rights Center of Maine (formerly Maine Advocacy Services) or the DHHS Office of Advocacy staff help you if you wish. While

hearings are not conducted like courtroom trials, the hearing officer is allowed to establish and maintain rules that everyone present at the hearing must follow. The hearing will be recorded electronically.

The Hearing Officer's Decision:

The hearing officer will issue a formal written decision that discusses the issues and testimony presented, and applies the facts of the situation, as he or she has determined them, to the relevant rights regulations and the AMHI Consent Decree.

Under rare circumstances, and as noted, the process described above may take place at Level II.

WHAT HAPPENS IF YOU RECEIVE A FINAL DECISION FROM THE DIVISION OF ADMINISTRATIVE HEARINGS:

If the commissioner has sent your case to the hearing officer for a final decision, that decision represents the Department's final ruling on the matter.

If you remain dissatisfied with the outcome of this ruling, you may appeal to the Maine Superior Court under Rule 80C of the Maine Rules of Civil Procedure.

WHAT HAPPENS IF THE DIVISION OF ADMINISTRATIVE HEARINGS MAKES A RECOMMENDED DECISION ABOUT YOUR GRIEVANCE:

If the commissioner has sent your grievance to the hearing officer for a recommended decision, the hearing officer will follow all the steps outlined above for a Level III hearing, and will send the recommended decision to the commissioner for review.

The Commissioner's Review: The commissioner will review the recommended decision within thirty (30) working days, whenever practicable. During this review, the commissioner will consider any broad policy or financial considerations that your grievance raises, and make a final decision on the matter with those considerations in mind.

APPEALING THE COMMISSIONER'S DECISION

The decision of the commissioner after a Level III review represents the final state agency action on the matter. If you remain dissatisfied with the outcome of this ruling, you may appeal to the Maine Superior Court under Rule 80C of the Maine Rules of Civil Procedure.

Important Addresses and Phone/FAX/TTY Numbers

For more general information about or assistance with the grievance process, contact:

DHHS Office of Advocacy

Chief Advocate
11 State House Station
Augusta, ME 04333
Phone: (207) 287-4228 Fax: (207) 287-7186 TTY: (207) 287-1798

OR

Disability Rights Center of Maine (formerly Maine Advocacy Services)

Disability Rights Center of Maine
24 Stone Street
P. O. Box 2007
Augusta, ME 04338-2007
Phone and TTY: (207) 626-2774 or 1-800-452-1948 Fax: (207) 621-1419

Level I grievances involving services provided by DHHS regional office staff must be sent to the director of the regional office in your area. The locations of those offices and the areas they serve are listed below:

DHHS Region I Office
(Serving Cumberland and York Counties)

Regional Director
DHHS Region I Administrative Office
169 Lancaster Street
Portland, ME 04101
Phone: (207) 822-0270 Fax: (207) 822-0295 TTY: (207) 822-0272

DHHS Region II Office
(Serving Androscoggin, Franklin, Kennebec, Knox, Lincoln, Oxford, Sagadahoc, Somerset, and Waldo Counties)

Regional Director
DHHS Region II Administrative Office
State House Station #11
Augusta, ME 04333
Phone: (207) 287-8007 Fax: (207) 287-4052 TTY: (207) 287-8126

DHHS Region III Office
(Serving Aroostook, Hancock, Penobscot, Piscataquis, and Washington Counties)

Regional Director
DHHS Region III Administrative Office
176 Hogan Road
Bangor, ME 04401

Phone: (207) 941-4360 Fax: (207) 941-4389 TTY: (207) 941-4392

Level II grievances involving services provided in the community or by BDS regional office staff must be sent to the BDS program manager. S/he can be reached as follows:

Mental Health Program Manager

State House Station#11

Augusta, ME 04333

Phone: (207) 287-4203 Fax: (207) 287-4291 TTY: (207) 287-2000

Level II grievances involving services provided by AMHI and BMHI must be sent to the Superintendent's Office of the institution in which you are receiving services. They can be reached as follows:

Augusta Mental Health Institute, Office of the Superintendent

P. O. Box 724

Augusta, ME 04330

Phone: (207) 287-7230 Fax: (207) 287-6123 TTY: (207) 287-7219

Bangor Mental Health Institute, Office of the Superintendent

P. O. Box 926

Bangor, ME 04401

Phone: (207) 941-4036 Fax: (207) 941-4062 TTY: (207) 941-4322

Level III grievances must be sent to the commissioner. The commissioner can be reached as follows:

DHHS, Office of the Commissioner

State House Station#11

Augusta, ME 04333

Phone: (207) 287-4223 Fax: (207) 287-4268 TTY: (207) 287-2000

Sample Form - Adult Grievances

Department of Behavioral and Developmental Services

Adult Consumer Grievance Reporting Form

Level I

Formal Grievance Filing

Your Name: _____ Today's Date: _____

Address: _____

Telephone/TTY No.: _____

If you cannot be reached by phone or TTY, how else can you be reached? _____

Name of Service Provider/Agency Involved:

Location of Service Provider: Town/City:

Date(s) on Which the Grievance Took Place:

Names of People Involved: _____

Please Briefly Describe What Happened: (You may use the back of this form if necessary.)

Please Identify the Specific Issue That Needs to Be Addressed:

Please Suggest How the Matter Can Be Resolved:

Section II

Informal Grievances Involving Child or Adolescent Recipients

We expect agencies to have an informal grievance process available to recipients of mental health services. We encourage you to utilize an agency's informal grievance process to resolve any grievances you may have directly with the agency. The utilization of such an agency mechanism is an alternative means to resolve the grievance. The agency's informal grievance process may be used at the sole discretion of the recipient or the recipient's family prior to engaging in the formal grievance resolution process. However, whenever the recipient or the recipient's family feel that resolution is not

forthcoming, or is not to their satisfaction, or they are simply uncomfortable discussing their grievance with the provider, they may proceed with the formal resolution process that follows.

GRIEVANCES INVOLVING CHILD OR ADOLESCENT RECIPIENTS OF MENTAL RETARDATION OR DEVELOPMENTAL SERVICES

At this time there is no formal grievance process in law or rule covering children and adolescents who are receiving Department services other than mental health services. However, the Department has mediation services available for the resolution of all grievances. Contact the DHHS Office of Advocacy or the Disability Rights Service of Maine (see page 23 of this Guide) for further information regarding grievances involving recipients of mental retardation or developmental services.

Note: The grievance resolution process for children and adolescents is the same, whether the mental health service has been provided by a community provider, an inpatient or residential facility, or by BDS regional staff.

How to File a Grievance

If you have been unable to resolve your grievance through your service provider, or you choose to take your grievance directly to the Department, your grievance must be documented on a DHHS Grievance Form, found on page 24 of this Guide and also available from all providers of mental health services to children and adolescents and at all DHHS offices.

The Grievance Form asks you to provide the following information about the problem or issue you wish to grieve:

- the name, address, phone number and date of birth of the child or adolescent recipient
- the name, address, phone number and relationship to the child/adolescent of the person filing the grievance
- the name, address, and phone number of the provider/agency involved
- the dates upon which the problem/issue which you are grieving took place
- the names of all people involved
- a description of what happened that has resulted in the filing of the grievance
- the specific issue that needs to be addressed
- your suggestions about possible ways to resolve the situation

If you need help in filling out the Grievance Form, your provider or a representative from DHHS is also available to assist you.

Send the fully completed Grievance Form to the designated DHHS Grievance Coordinator listed at the bottom of the form, making sure to indicate grievance on the lower left corner of the envelope.

What Happens Next - Mediation

The DHHS Grievance Coordinator or the mediator will contact you to arrange a time and location for the mediation meeting to take place. This meeting must be held within five (5) calendar days of the Grievance Coordinator's receipt of the fully completed Grievance Form.

However, you may waive this requirement that the mediation meeting take place within five calendar days, if you desire. You will be considered to have waived this requirement if you are unavailable to attend any mediation meeting offered to you within this five day period. If this happens, the mediation meeting will be held as soon as practicable.

If mediation is successful, resolution of your grievance to your satisfaction will be achieved by the end of the mediation process.

If a resolution satisfactory to you has not been achieved by the conclusion of the mediation meeting, you may request a subsequent administrative hearing. If you request the administrative hearing before you leave the mediation meeting, then the written recommended decision of the hearing officer must be issued within two weeks of the Grievance Coordinator's receipt of the Grievance Form. However, if you request a subsequent administrative hearing at any time after the conclusion of the mediation meeting, your request will be treated in the same manner as if you had chosen an administrative hearing initially.

What Happens Next - Administrative Hearing

The DHHS Grievance Coordinator or the hearing officer will contact you to arrange a time and location for the hearing to take place. The hearing must be held within five (5) calendar days of the Grievance Coordinator's receipt of the fully completed Grievance Form.

However, you may waive this requirement that the administrative hearing take place within five calendar days, if you desire. You will be considered to have waived this requirement if you are unavailable to attend any administrative hearing offered to you within this five day period. If this happens, the hearing will be held as soon as practicable.

The administrative hearing is a formal process, conducted in accordance with State law and presided over by an impartial hearing officer from the Division of Administrative Hearings of the Department of Labor. All hearings are recorded in a form susceptible to transcription, as required by law.

Pre-hearing Conference:

A pre-hearing conference is not required by law, but the hearing officer will probably hold a meeting to talk to you and someone who represents the agency or facility you have

filed a grievance against. During this meeting, you will be asked to identify the issues that need to be discussed during the hearing. You may also be asked to talk about what, if any, witnesses and documents you may want to bring to the hearing, so that it will proceed as smoothly as possible.

The Administrative Hearing:

At the hearing, you may present any witnesses to the event(s) under discussion, or present any documents that are relevant to the situation under review. In addition to yourself, providers as well as advocates for your child/adolescent may testify at the administrative hearing.

You also may examine and/or cross-examine witnesses, and have an attorney, a designated representative, or Disability Rights Center of Maine or the DHHS Office of Advocacy staff help you if you wish. While hearings are not conducted like courtroom trials, the hearing officer is allowed to establish and maintain rules that everyone present at the hearing must follow.

The Hearing Officer's Decision:

The hearing officer will issue to the Commissioner of DHHS a formal written recommended decision that discusses the issues and testimony presented, and the facts of the situation, as he or she has determined them. This recommended decision must be issued within one week of the Grievance Coordinator's receipt of the Grievance Form, unless otherwise agreed to by the parties involved. If the administrative hearing was requested at the conclusion of a mediation, then the hearing officer must issue the written recommended decision with findings of fact within two weeks of the Grievance Coordinator's receipt of the Grievance Form.

You may waive the deadline for a recommended decision, if you so desire. You will be considered to have waived the deadline if the hearing is held outside the five day period at your request or due to the unavailability of you or any person you want to have present at the hearing.

At any point after requesting an administrative hearing, you may elect mediation. If you do this, the deadline for scheduling the administrative hearing as well as the hearing officer's deadline for issuing a written recommended decision are suspended, and mediation will be held as soon as practicable.

It is important to remember that you can avoid a hearing and settle your grievance at any point in the process--until the hearing officer has issued his or her decision. You can even settle your grievance after the hearing has begun.

The Commissioner's Review:

The commissioner will review the recommended decision and must issue a final decision adopting, modifying, or rejecting the hearing officer's recommended decision no later than seven (7) business days from the date of the hearing officer's recommended decision. Parties to the grievance may submit written memoranda to the Commissioner

for his/her consideration no later than five (5) business days from the date of the hearing officer's recommended decision.

APPEALING THE COMMISSIONER'S DECISION

The decision of the commissioner represents the final state agency action on the matter. If you remain dissatisfied with the outcome of this ruling, you may appeal to the Maine Superior Court under Rule 80C of the Maine Rules of Civil Procedure.

Important Addresses and Phone/FAX/TTY Numbers

For more general information about or assistance with the grievance process, contact:

DHHS Office of Advocacy

Chief Advocate

State House Station #11

Augusta, ME 04333

Phone: (207) 287-4228 Fax: (207) 287-7186 TTY: (207) 287-1798

OR

Disability Rights Center of Maine (formerly Maine Advocacy Services)

Disability Rights Center of Maine

24 Stone Street

P. O. Box 2007

Augusta, ME 04338-2007

Phone and TTY: (207) 626-2774 or 1-800-452-1948 Fax: (207) 621-1419

All formal grievances involving child or adolescent recipients must be submitted on the DHHS Grievance Form (see page 24) to:

Children's Services Grievance Coordinator

DHHS

State House Station #11

Augusta, ME 04333-0040

Phone: (207) 287-4202 Fax: (207) 287-9915 TTY: (207) 287-4200

Child or Adolescent Grievance Form

Child or Adolescent Grievance Form ([Microsoft Word*](#)) ([PDF*](#))

Grievance Form Instructions ([Microsoft Word*](#)) ([PDF*](#))